Appendix B:
Examples of Legislative Language Consistent with Recommendations

The following are examples of legislative language from both proposed and adopted bills and ordinances consistent with the recommendations in this report. Please consult lawyers familiar with your state or local legislative processes and consider state or local context when drafting legislation.

Equity Intent

**Massachusetts S.1914** (2021) - “(2) Unexpended balances shall be allocated in a proportion to be determined by the department of public health, with at least 50 percent of total revenue dedicated to benefits, services, and programs for communities most impacted by health inequity and burdened by health outcomes such as obesity, diabetes, and heart disease.” [Section J2]

**California AB-1003** (2017) – “(a) The California Community Health Fund is hereby established in the State Treasury, and, upon appropriation by the Legislature, moneys in the fund shall be used to diminish the human and economic costs of diabetes, obesity, heart disease, and dental disease and to reduce inequitable disparities in health between population groups, in California.” [Section 1, Chapter 5, 104895.50]

**California AB-138** (2019) – “(5) Hispanics, African Americans, Native Americans, Alaska Natives, Asian Americans, Native Hawaiians, and Pacific Islanders have a higher prevalence of type II diabetes than non-Hispanic Whites. Hispanics and African Americans have two times higher prevalence: 7 percent of non-Hispanic Whites have type II diabetes, compared with 12 percent of Hispanics, 9 percent of Asian Americans, 14 percent of Pacific Islanders, 13 percent of African Americans, and 17.5 percent of Native American and Alaska Native populations. If trends are not reversed, it is predicted that 40 percent of Americans and nearly one-half of Latino and African American children born in the year 2000 will develop type II diabetes in their lifetimes. (6) The prevalence of obesity in the United States has increased dramatically over the past 30 years. In California, obesity rates have increased even more, rising from 8.9 percent in 1984 to 23.8 percent in 2011. Although no group has escaped the epidemic, low-income populations and communities of color are disproportionately affected.” [Section 1a; While this language does not explicitly indicate an intention of the legislation to advance equity or reduce disparities, by providing data on disparities, it signals an equity intent]
**Mississippi SB2830** (2013) – "It is the intent of the Legislature, by adopting the Sweetened Beverages and Syrups Tax Law and creating the Children's Health Promotion Fund, to diminish the human and economic costs of obesity in the State of Mississippi. This act is intended to discourage excessive consumption of sweetened beverages by increasing the price of these products and by creating a dedicated revenue source for programs designed to prevent and treat childhood obesity and health conditions which result from it." [Section 3]

**Rhode Island H 5715** (2021) – "It is the intent of the general assembly, by adopting the sugary drinks tax, to: (1) Increase access to and promote consumption of fresh fruits and vegetables among Rhode Island’s most vulnerable populations whose health is adversely impacted by the health conditions associated with sugary drinks; (2) Improve the overall health and wellness of Rhode Island families, children and residents; and (3) Reduce the burden of chronic disease in the ocean state." [44-70-2. Legislative intent.]

**Dedication**

**Massachusetts S.1914** (2021) – “There shall be established and set up on the books of the commonwealth a separate fund to be known as the Commonwealth’s Health Promotion Fund. The fund shall consist of revenues from the commonwealth generated by the tax...The department of public health shall administer the fund. The commissioner, in consultation with the Commonwealth’s Health Promotion Advisory Board ...shall make expenditures from the fund ...provided that not more than 10 per cent of the amounts held in the fund in any one year shall be used by the department for the combined cost of the program administration, technical assistance or program evaluation... (3) Qualifying programs funded ... shall include but not be limited to: (i) Funding for access to community health care; (ii) Expansion of the SNAP Healthy Incentive Program ...; (iii) Funding for the department of elementary and secondary education to support and promote nutrition programs in K-12 schools serving low-income communities; (iv) Funding for the department of early education and care to support and promote nutrition programs for preschools, nursery schools, and childcare facilities serving low-income communities.; (v) A municipal grant program for the creation and improvement of water fountains, installation of water filling stations, improvement of water quality, and increasing water access in schools and early education facilities serving low-income communities.” [Section 2J]

**Connecticut sHB 5461** (2015) – “There is established an account to be known as the "soft drink tax account" which shall be a separate, nonlapsing account within the General Fund. The account shall contain any moneys required by law to be deposited in the account. Moneys in the account shall be expended by the Department of Public Health for purposes of public education and outreach regarding obesity, including childhood obesity, heart disease and diabetes." [Section 2]

**Boulder, Colorado Ord. No. 8181, § 1** (2017) – “The revenues from this excise tax shall be designated for the administrative cost of the tax, and once that obligation has been fulfilled, used for health promotion, general wellness programs and chronic disease prevention in the City of Boulder that improve health equity, such as access to safe and clean drinking water, healthy foods, nutrition and food education, physical activity, and other health programs especially for residents with low income and those most affected by chronic disease linked to sugary drink consumption." [City of Boulder Municipal Code 3-16-11]

[Note that additional examples of language that establishes a dedicated fund are contained in following section describing allocation targets – see Vermont and New York bills.]

**Allocation**

**California AB-2466** (2020) - “(a) Fifty percent of the fund revenues shall be distributed to the State Department of Public Health, the State Department of Health Care Services, the State Department of Education, the Department of Food and Agriculture, and the State Water Resources Control Board to promote health equity, to reduce health disparities, to improve oral health, and to prevent the leading causes of illness, injury, and premature death, especially those caused by sugary drink consumption. Illnesses include obesity and diseases exacerbated by obesity, such as diabetes, heart disease, and cancer, that are caused by sugary drink consumption. Those moneys shall be allocated as follows: (1) _____ percent to the State Department of Public Health to support health equity and prevention efforts, support health in all policies work, surveillance of chronic
District of Columbia L.B. 166 (NS) (2021) - “(b) All revenue collected by the tax and penalties imposed in this chapter shall be deposited in the Fund. (c) Revenue collected in the Fund shall be allocated annually, subject to the availability of funding, in the following priority: (1) To cover the fiscal impact of the repeal of the sales tax on “soft drinks” in Title IV of the Nutrition Equity Amendment Act of 2021, as introduced on March 24, 2021 (B23-XXX); (2) To cover the fiscal impact of this Act; (3) $5,000,000 to the Department of Health Care Finance for programs that integrate healthy food access as a core component of health care (also known as “Food as Medicine” interventions); (4) $5,000,000 to the Department of Health for programs aimed at reducing and preventing nutrition-related chronic diseases such as diabetes, hypertension, and heart disease; including chronic disease management and prevention, and wraparound nutrition services; (5) $1,000,000 to the Office of the Deputy Mayor for Economic Development for programs that integrate healthy food access as a core component of health care in low food access communities; (6) $250,000 to the Families First DC program to deliver nutrition education, cooking lessons, and healthy shopping lessons at Family Success Centers. (7) $250,000 to the Department of Human Services for the establishment of the “Healthy Family Grants Program” to fund programs that deliver nutrition education, cooking lessons, and healthy shopping lessons; programs that promote physical activity, inclusive play, and the creation for safe play structures on the grounds of family shelters and transitional housing; and building and maintenance of gardens at family shelters and transitional housing. (8) $3,500,000 to the Office of the State Superintendent of Education for experiential food literacy education for students in Grades Pre-Kindergarten through 5 that gives students opportunities to grow, prepare, and eat food, and learn about healthy eating and nutrition, to be provided in-house or by outside organizations; and (9)(A) Any remaining money in the Fund shall be used to fund and issue grants to programs or projects that promote healthy eating and active living and prevent or reduce the health consequence of the consumption of sugary drinks in the District. (B) Programs receiving funds or grants shall have a focus on: (i) Food access and equity; (ii) Improving community nutrition and increasing physical activity; or (iii) Reducing and preventing nutrition related chronic illnesses such as diabetes, hypertension, and heart disease. (C) Special consideration shall be given to programs that target communities most affected by health disparities. (D) Recommendations on how to allocate remaining money in the Fund shall be included in the Food Policy Council’s annual report, pursuant to section 3(c) of the Food Policy Council and Director Establishment Act of 2014, effective March 10, 2015 (D.C. Law 20191; D.C. Official Code § 48-312(c)).” [47-5207. Nutrition Equity Catalyst Fund administration and allocation]

Vermont H.37 (2021) – “a) There is established a special fund pursuant to chapter 7, subchapter 5 of this title comprising the revenue from the tax imposed by this chapter together with any additions or interest accruing to the Fund. The Fund shall be called the “Adverse Childhood Experiences Initiative Fund.” The Commissioner of Finance and Management may draw warrants for disbursements from this Fund in anticipation of receipts. The monies in the Fund shall be available for the General Assembly to appropriate in accordance with subsection (b) of this section. Any remaining balance at the end of the fiscal year shall be carried forward in the Fund. The Fund shall be administered by the Secretary of Human Services. (b) The funds in the Adverse Childhood Experiences Initiative Fund shall only be used to: (1) subsidize initiatives focused on building resilience for individuals experiencing adverse childhood experiences; (2) support programs directed at preventing adverse childhood experiences; and (3) support programs directed at improving childhood nutrition.” [Section 9405]

New York S04602 (2021) – “1. There is hereby established ... a fund to be known as the “community health equity fund”. The community health equity fund shall consist of all taxes, interest, penalties, and other amounts collected...
2. All moneys in the community health equity fund shall, upon appropriation ..., be allocated for the purposes of statewide programs. Up to five hundred thousand dollars shall be allocated to the community health benefits trust account for the establishment and operation of the community advisory board on health equity ..., b of the public health law. Of the remaining funds, moneys shall be allocated as follows: (a) Fifty percent to supplemental nutrition assistance program (SNAP)

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incentives. Such funding shall support programs that provide recipients of SNAP with additional moneys or coupons directed to their electronic benefits transfer card when they purchase fruits and vegetables. This allocation of funds shall be used to promote the consumption of fruits and vegetables and foster a healthier community. (b) Fifty percent to be dispersed to the community health benefits trust.... 3. Moneys shall be payable from the fund ... on vouchers approved and certified by the commissioner of health.” [§ 99-oo.]

“The commissioner shall establish a grant program to be administered by the department and to be as the "empire state community benefits grant". Such grant shall be made available to, but not limited to, community-based programs and organizations related to promoting food access and equity in the community, improving community nutrition, increasing access to nutrient rich foods in schools, identifying and improving the quality of school-based courts, playgrounds, parks or trails, promoting physical activity and exercise, reducing nutrition related chronic illnesses including diabetes, heart disease, obesity and tooth decay, and targeting communities most affected by adverse health disparities, community-based initiatives that impact social determiners of health, among other community-based programs and organizations. Such community-based programs and organizations shall submit an application to the department to determine their eligibility. The commissioner shall promulgate rules and regulations regarding eligibility, the application process, and awarding of grants pursuant to this section. All moneys for grants awarded pursuant to this section shall be from the community health benefits trust established pursuant to section two hundred forty-four-a of this title.” [§ 244.]

**Advisory Board**

**New York S04602** (2021) - “Community advisory board on health equity. 1. A community advisory board on health equity shall be established within the department to make recommendations on the allocation of funds received pursuant to section ninety-nine-oo of the state finance law to support and improve health equity. 2. (a) The board shall consist of thirteen members and shall be appointed as follows: (i) five members shall be appointed by the governor; (ii) three members shall be appointed by the temporary president of the senate; (iii) three members shall be appointed by the speaker of the assembly; (iv) one member shall be appointed by the minority leader of the senate; and (v) one member shall be appointed by the minority leader of the assembly. (b) Four members of the board shall be representatives of the public health system; three members shall have experience in the implementation of community-based programs and organizations that have a focus on expanding health food access and food security; three members shall have experience in researching or evaluating programs related to the consumption of sugary beverages; and three members shall be representative of those communities that have been disproportionately impacted by the effects of sugar-sweetened beverage consumption. (c) For the purposes of this section, communities that have been 10 disproportionately affected by the consumption of sugar-sweetened beverages shall be determined by the commissioner by reviewing data which shall include, but is not limited to, the following: (i) the rate of adult or childhood obesity in a community; (ii) the rate of diabetes in a community; (iii) the rate of cardiovascular disease in a community; (iv) the rate of geographic proximity to healthy food and beverage options in a community; (v) the rate of dental decay in a community; and (vi) the rate of liver disease in a community. 3. The board shall have its first meeting within six months of the effective date of this section and shall meet every six months thereafter. 4. A majority of the appointed voting membership of the board shall constitute a quorum, but not less than seven voting members shall be necessary for any action taken by the board. 5. The board shall be staffed by the department and may create technical advisory workgroups as deemed necessary. 6. Members of the board shall serve for a term of three years, at which point such membership position shall be subject to reappointment. 7. Vacancies on the board shall be filled in the same manner as the original appointment upon the expiration of a member's term pursuant to subdivision six of this section, or upon the death, resignation or removal of any such member. 8. Community advisory board members shall serve without compensation but shall be reimbursed for their necessary and actual expenses incurred while engaged in the business of the community advisory board. 9. The board shall prepare an annual report detailing the amount of funds in the health equity account pursuant to section ninety-nine-oo of the state finance law, including but not limited to any unspent funds, recommendations for the use of any unspent funds, the programs and initiatives implemented with the allocated funding, and an impact evaluation of such initiatives. The initial report shall be submitted to the governor, speaker of the assembly and temporary president of the senate no later than two years following the effective date of this section. Such reports shall also be posted on the department’s website. [§ 244-b.]

**Washington SB5371** (2021) – “(a) A community advisory board is created within the department to make recommendations to the department on the allocation disbursement of funds received to support initiatives addressing social determinants of Investing Sweetened Beverage Tax Revenues to Advance Equity:
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Rhode Island H 5175 (2021) – “(a) The department shall provide annually, and no later than three (3) months after the end

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of the fiscal year, information about tax revenues received and the programs and initiatives funded by these revenues, and any unspent funds to the general assembly and general public. The department shall develop an Internet website and post the annual report and additional materials to inform distributors, retailers, and the general public about the tax, its intent, its scope, and operation. (b) The department shall contract with academic researchers to complete an evaluation of the following: (1) The effects of the tax on sugary drink prices, sales and consumption one and three (3) years after tax implementation; (2) The economic impacts of the tax including employment and business revenues in affected business sectors one and three (3) years after tax implementation; and (3) Impacts of programs and initiatives funded by the tax. (c) The evaluations set forth in subsection (b) of this section should specifically address the equity impacts of the tax. Evaluators should develop partnerships with community members to ensure community participation in the evaluation.” [44-70-15. Public Reporting and Evaluation]

New York S04602 (2021) - “9. The board shall prepare an annual report detailing the amount of funds in the health equity account pursuant to section ninety-nine-oo of the state finance law, including but not limited to any unspent funds, recommendations for the use of any unspent funds, the programs and initiatives implemented with the allocated funding, and an impact evaluation of such initiatives. The initial report shall be submitted to the governor, speaker of the assembly and temporary president of the senate no later than two years following the effective date of this section. Such reports shall also be posted on the department’s website.” [§ 244-b.]

Oakland Res. No. 86161, § 3 (2016) - “H. The Community Advisory Board shall publish an annual report that includes the following: 1) Recommendations on how to allocate the City’s general funds to reduce the consumption of sugar sweetened beverages in Oakland and to address the results of such consumption; 2) How and to what extent the City Council and Mayor have implemented the recommendations presented by the Board; 3) Information, if available, concerning the impact of this Chapter on the public health of the residents of the City; and 4) Any additional information that the Panel deems appropriate.” [City of Oakland Municipal Code 4.52.080]